

CANTON TOWNSHIP

4711 Central SE --- Canton, Ohio 44707

(330) 484-2501 FAX (330) 484-2556

www.cantontwp-oh.gov

APPLICATION FOR ZONING CERTIFICATE

Date: _____ Permit No: _____ Receipt No: _____ Septic: ____ Sewer: ____

To the Board of Canton Township Trustees:

The under sign hereby applies for a zoning certificate for the following use, to be issued on the basis of the representations contained herein, all of which applicant states to be true:

1. Location of Property _____ Lot No: ____ Parcel No: _____

2. Name of Land Owner: _____ Phone No: _____

3. Agent/Contractor: _____ Phone No: _____

Address: _____ City: _____ State: ____ Zip Code: _____

4. Proposed Use:

____ New Construction / Decks/ Pools ____ Retail --- Local Business
____ Residence --- No. of Units ____ Business --- Commercial
____ Remodeling ____ Manufacturing --- Industrial
____ Accessory Building ____ Other _____

Structure: ____ Brick ____ Frame ____ Other

5. Dimensions of Lot:

Main Road Frontage: _____ feet. Depth of Lot from Right-of-Way _____ feet.

Set Back from Front Road Right-of-Way _____ feet.

Set Back from Side Road Right-of-Way _____ feet.

Side Yard Set Back: (N S E W) _____ feet.

Side Yard Set Back: (N S E W) _____ feet.

Rear Yard Set Back: _____ feet.

6. Dimensions of Structure:

Width: _____ Depth: _____ Height: _____ Basement ____ Y ____ N

First Floor Square Footage: _____ Second Floor Square Footage: _____

Total Square Footage: _____ Fee (Based on Total Square Footage of Structure: \$ _____

ONLY PAYABLE BY BANK OR PERSONAL CHECK & MONEY ORDER

7. Valuation of Structure: \$ _____

Number of Stories: _____ Usable floor space for use as living quarters exclusive of basements, porches, garages, breezeways, terraces, attics, or partial stories.

Date: _____

Signature of Land Owner/Agent

A plan must be submitted with this application showing the size & location of lot, the dimensions & location of the proposed structure on the lot & the dimensions & location of the existing building or structures on the lot.

PERMIT EXPIRES ONE YEAR (1) FROM DATE OF ISSUANCE IF CONSTRUCTION HAS NOT COMMENCED.

*****MUD AND DEBRIS ON ROAD POLICY*****

TO CONTRACTORS & TOWNSHIP RESIDENTS, THE CANTON TOWNSHIP BOARD OF TRUSTEES REQUEST THAT YOU MAINTAIN THE CONTRSUCTION SITE IN A PROPER MANNER SO THAT YOU DO NOT TRACK MUD & OTHER DEBRIS ONTO THE PUBLIC STREET. IF MUD & DEBRIS IS TRACKED ONTO THE STREET, PLEASE CLEAN THE STREET PROMPTLY. IF IT BECOMES NECESSARY FOR THE TOWNSHIP TO CLEAN THE STREET, YOU WILL BE INVOICED AT THE RATE OF \$50.00 AN HOUR PER PIECE OF EQUIPMENT WITH AN OPERATOR.

ADDITIONAL EMPLOYEES REQUIRED FOR THE CLEAN UP WILL BE INVOICED AT AN HOURLY RATE BASED UPON CANTON TOWNSHIP CURRENT SALARY, PLUS FRINGE BENEFITS.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT CANTON TOWNSHIP ROAD SUPERVISOR AT (330) 484-2501.

THIS POLICY ADOPTED DECEMBER 30, 1996.

PROPERTY OWNER/AGENT: _____ DATE: _____